<b>\$EF</b>	PA	United States Environmental Protect on Agency Washington, DC 20460 MSGP INDUSTRIAL DISCHARGE MONITORING REPORT (MDMR)	Form Approved. OMB No. 2040-0004
Reason(s) for Su	ibmission (Che		ŪΙ̂2 U
Reporting no Reporting that Reporting that	discharge for a If your site stat If your site stat	(Fill in all Sections) all outfalls for this monitoring period (Fill in Sections A, B, C.1, D, and F). tus has changed to inactive and unstaffed (Fill in Sections A, B, F and include date of status changed in Section E.4). tus has changed to active (Fill in all Sections and include date of status change in comment field in Section E.4). tilutant reductions are achievable for all outfalls and for all pollutants via Part 6.2.1.2 of the MSGP (Fill in Sections A, B and F).	
A. Permit Tracki	ing Number:	MAR05DE21 Note: Read instructions before	completing this Form.
B. Facility Inform			
1. Facility Name:	UFP	BELCHERTOMN LLLC	
2. Facility Locatio			
a. Street;	155	BAY ROAD	
b. City:	BELC	HERTOMN	007-
3. Additional Faci	lity Information		
Contact Name:		Email.	
Phone:	111-1	Ext	
1		f MDMR was prepared by someone other than the person signing the certification in Section F)	
Prepared by:	ROBE		
Organization:	NNIN	ERISALI FORESTI PRODUCTS INC	
Email.	RDIC	KENSQUFPII.COM	
Phone:	6 16 -	365-1526 Ext.	
C. Discharge Info	ormation		
1. Identify monitor	ring period:	Check here if proposing alternative monitoring periods due to irregular stormwater runoff. Identify alternative monitoring period you are reporting monitoring data:	native monitoring
Quarter 1 (A)	pril 1 – June 3	0)	
Quarter 2 (Ju	uly 1 – Septem	nber 30)	
Quarter 3 (O	october 1 – Dec	cember 31) Quarter 3 From // To //	
Quarter 4 (Ja	anuary 1 – Mai	rch 31)	i
2. Are you require	ad to monitor fo	or cadmium, copper, chromium, lead, nickel, silver, or zinc?	
1		of the receiving water? 16.4 mg/L	
D. Outfall Informa			
1. How many outs	all(s) are ident	filed in your SWPPP? 02 List name of outfall(s) required to be monitored in table below	
2. Do any of your	outfalls discha	arge substantially identical effluents? 🔲 YES 💹 NO	
2.a. If yes, for eac	th monitored or	utfall, indicate outfall names that are substantially identical in table below.	
3.A. Monitored Ou	utfall Name*	3 B. Substantially Identical Outfalls [List name(s) of outfall(s) substantially identical to outfall in 3.A. (if applicable)]	3.C. No Discharge?
001			
002			
*Seference attach		onal space needed to complete the table.	
rescience attach	iment i addido	inal space needed to complete the table.	

SEPA		UNITED STATES ENVIRONMENTAL PROTECTION AGENCY WASHINGTON, DC 20460 MSGP INDUSTRIAL DISCHARGE MONITORING REPORT (MDMR)	ENVIRONMENTAL PROTE WASHINGTON, DC 20460 ISCHARGE MONITORI	NG REPOR	NCY RT (MDMR)	Form Appro	Form Approved. OMB No. 2040-0004	
E. Monitoring Information	on					Note: Ma	Note: Make additional copies of this form as necessary.	om as necessary.
1. Permit Tracking Number:	er MARIOISIDE 211	21						
2. Nature of Discharge: [	2. Nature of Discharge: 🔯 Rainfall (Complete line items 2.s., 2.b., & 2.c.)	ems 2.8 2.b., & 2.c.) 🔲 Snowmett						
2.a. Duration of the rainfall event (hours):	ill event (hours):	2 b. Rainfall amount (inches): 00 0 7	00 7	2.c. Time si	ince previous meas	2.c. Time since previous measurable sform event (days): 003	03	
3.a. Outfall Name	3.b. Monitoring Type (QBM, ELG, S/T, I, O)*	3.c. Parameter	3.d. Quality or Concentration	3.e. Units	3.f. Results Description	ption 3.g. Collection Date	3.h. Exceedance due to natural background pollutant levels	3.i. No further pollutant reductions achievable?
81	OBM	TOTAL COPPER	0.054	NG/L		9/6/2012		
81	QBM	COD	48	MG/L	ıs	9/6/2012		
001	QBM	TSS	194	MG/L		9/6/2012		
			9			82.0		
	QBM		0.0134	MG/L	: !	9/6/2012		
002	OBM	TOTAL COPPER	0.645	MG/L		9/6/2012		
002	QBM	COD	170	MG/L		9/6/2012		
002	QBM	TSS	1310	MG/I		9/6/2012		
						* 7	0	
						Since and		
							) C	
(OBM) - Outdody hands	mark manifering; (ELC) _ A	noual affluent limitations outdelines monitoring	oitoring (S/T) - States	e or Trivaleso	seedie monitorian	(1) - Impaired waters manitoring:	(O) -Other monitoring as required by EPA	red by EPA
4. Comment and/or Expla	nation of Any Violations (Re	4. Comment and/or Explanation of Any Violations (Reference all attachments here)						
F. Certification								
Michael Ellerbrook/General Manager of Operations	neral	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who mannage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware	locument and all att coordance with a sy- coordance with a sy- red and evaluated to ersons who manag ing the information, lifet, true, accurate.	achments wastem designe stem designe he information of the system the informat the informat the informations of the information of the informat	ere prepared ed to assure on submitted. Those ion submitted on submitted	ASOL I	Q.P.	9/14/12
Typed or Printed Name/Title of Principal Executive Officer or Authorized Agent Email of Principal Executive Officer or Authorized A	inted Name/Title of Principal Executive Officer or Authorized Agent	that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	submitting false info	mation, inck	-	Signature of Principal Executive (	Principal Executive Officer or Authorized Agent	1 1
Email of Principal Executiv	Email of Principal Executive Officer or Authorized Agent	-		_				



September 14, 2012

U.S. Environmental Protection Agency Office of Water, Water Permits Division Mail Code 4203M, ATTN: MSGP Reports 1200 Pennsylvania Avenue, NW Washington, D.C. 20460

RE:

Discharge Monitoring Report – Quarter 2 UFP Belchertown, LLC, Belchertown, MA Permit Tracking Number: MAR05DE21

Dear Sir or Madam:

Enclosed please find the DMR for the above referenced facility.

If you have any questions please do not hesitate to contact me at 616/365-1526 or  $\underline{rdickens@ufpi.com}$  .

Thank you,

**Robert Dickens** 

**Regulatory Compliance Specialist** 

Encls.